

Please type a plus sign (+) inside this box



PTO/SB/17 (12/99)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p>PTO</p> <p>FEE TRANSMITTAL</p> <p>for FY 2000</p> <p><small>Patent fees are subject to annual revision.</small></p> </div> <div style="text-align: right;"> <p>Complete if Known</p> <p>Application No. 09/374,502</p> <p>Filing Date August 13, 1999</p> <p>First Named Inventor Qing Ma</p> <p>Examiner Name J. Fenty</p> <p>Group/Art Unit 2815</p> <p>Attorney Docket No. 42390P6623</p> </div> </div>	
<p>TOTAL AMOUNT OF PAYMENT</p>	<p>(\$) 110.00</p>

<p>METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayments to:</p> <p>Deposit Account Number: 02-2666</p> <p>Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table style="width: 100%;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>101</td><td>710</td><td>Utility filing fee</td><td></td></tr> <tr><td></td><td></td><td>106</td><td>320</td><td>Design filing fee</td><td></td></tr> <tr><td></td><td></td><td>107</td><td>490</td><td>Plant filing fee</td><td></td></tr> <tr><td></td><td></td><td>108</td><td>710</td><td>Reissue filing fee</td><td></td></tr> <tr><td></td><td></td><td>114</td><td>150</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> <td></td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table style="width: 100%;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>25</td> <td>30</td> <td>18.00</td> <td>0</td> </tr> <tr> <td>2</td> <td>3</td> <td>80.00</td> <td></td> </tr> <tr> <td colspan="4">Multiple Dependent</td> </tr> </tbody> </table> <p><small>**or number previously paid, if greater. For Reissues, see below</small></p> <table style="width: 100%;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>103</td><td>18</td><td>Claims in excess of 20</td><td></td></tr> <tr><td></td><td></td><td>102</td><td>80</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td></td><td></td><td>104</td><td>260</td><td>Multiple Dependent claim, if not paid</td><td></td></tr> <tr><td></td><td></td><td>109</td><td>80</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td></td><td></td><td>110</td><td>18</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$)</td> <td></td> </tr> </tbody> </table>	Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			101	710	Utility filing fee				106	320	Design filing fee				107	490	Plant filing fee				108	710	Reissue filing fee				114	150	Provisional filing fee		SUBTOTAL (1)				(\$)		Total Claims	Extra Claims	Fee from below	Fee Paid	25	30	18.00	0	2	3	80.00		Multiple Dependent				Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			103	18	Claims in excess of 20				102	80	Independent claims in excess of 3				104	260	Multiple Dependent claim, if not paid				109	80	**Reissue independent claims over original patent				110	18	**Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)				(\$)		<p>3. 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unavoidable</td><td></td></tr> <tr><td></td><td></td><td>141</td><td>1,240</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td></td><td></td><td>142</td><td>1,240</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td></td><td></td><td>143</td><td>440</td><td>Design issue fee</td><td></td></tr> <tr><td></td><td></td><td>144</td><td>600</td><td>Plant issue fee</td><td></td></tr> <tr><td></td><td></td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td></td><td></td><td>123</td><td>130</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td></td><td></td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td></td><td></td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td></td><td></td><td>146</td><td>710</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td></td><td></td><td>149</td><td>710</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td></td><td></td><td>179</td><td>710</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td></td><td></td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (3)</td> <td>(\$)</td> <td>110.00</td> </tr> </tbody> </table> <p>Other fee (specify) _____</p> <p>Other fee (specify) _____</p> <p>* Reduced by Basic Filing Fee Paid</p>	Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			105	130	Surcharge - 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879
Signature		Telephone	(503) 684-6200
		Date	06/20/01

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2815

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/374,502
		Filing Date	August 13, 1999 JUL - 5 2001
		First Named Inventor	Qing Ma TC 2800 MAIL ROOM
		Group Art Unit	2815
		Examiner Name	J. Fenty
Total Number of Pages in This Submission		Attorney Docket Number	42390P6623

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- Check for \$110.00
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	- Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	June 20, 2001

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: June 20, 2001			
Typed or printed name	Deborah L. Higham		
Signature		Date	June 20, 2001

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